



# Sumter County Clerk of Court

Gloria R. Hayward, Clerk  
215 E McCollum Ave  
Bushnell, FL 33513  
352-569-6600  
www.sumterclerk.com



## APPLICATION FOR HOME SOLICITATION SALE PERMIT AND IDENTIFICATION CARD

### APPLICANT'S INFORMATION:

Full Name: \_\_\_\_\_

First

Middle

Last

Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

Other Names (Aliases/Maiden/Nicknames): \_\_\_\_\_

Local Residential Address: \_\_\_\_\_

Number

Street

City

State

Zip

Permanent Residential Address: \_\_\_\_\_

(If different than local)

Number

Street

City

State

Zip

How long have you resided in Sumter County? \_\_\_\_\_ In Florida? \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Sex: \_\_\_\_ Race: \_\_\_\_\_

Have you ever been convicted of, pled guilty to, or pled nolo contendere to any crime? YES\_\_\_\_ NO\_\_\_\_

If yes, provide nature of all charges, arresting police agency, when arrested, and case disposition (attach separate sheets if necessary): \_\_\_\_\_

Have you applied for or do you have a Sumter County Business Tax Receipt (Occupational License) Number?

YES\_\_\_\_ Number: \_\_\_\_\_ NO\_\_\_\_

### APPLICANT'S EMPLOYER INFORMATION:

Name of Employer: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Address: \_\_\_\_\_

Number

Street

City

State

Zip

Phone: (\_\_\_\_) \_\_\_\_\_

I hereby certify that the information contained in this application is correct and complete to the best of my knowledge and understand that falsification of this application in any detail may be grounds for denying issuance of my home solicitation sales permit. I also authorize the Sumter County Clerk of Court and/or a Deputy Clerk to submit this sworn application and a fingerprint card to the Florida Department of Law Enforcement for a criminal background investigation. I understand that the fee required for the processing of my application is non-refundable.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of physical presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who has produced a Florida driver's license or \_\_\_\_\_ as identification (or who is personally known to me) and who \_\_\_\_\_ did \_\_\_\_\_ did not take an oath that the information provided in the application is true and complete, and that he/she has complied with all criteria and procedures required by Chapter 86-144, General Laws of Florida, to the best of his/her knowledge.

(stamp)

Notary Public

**Official Use Only:** Application Received \_\_\_\_\_ FDLE Background Check Received \_\_\_\_\_ Clerk Initials \_\_\_\_\_  
(insert dates) Receipt Issued \_\_\_\_\_ SO Background Check Received \_\_\_\_\_ Date Issued \_\_\_\_\_  
Fingerprints Submitted \_\_\_\_\_ Approved/Denied (circle one)  
Sent to SO \_\_\_\_\_ Contacted Applicant \_\_\_\_\_